

Please type a plus sign (+) inside this box → +

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	60,130-1910; 03MRA0301
	First Named Inventor	Robert Ostrander
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	Herewith
	Group Art Unit	
	Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CENTER BEARING SEAL ASSEMBLY

(Title of the Invention)

the specification of which

☒ is attached hereto OR as United States Application Number or PCT International

☐ was filed on (MM/DD/YYYY) (if applicable).

Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label ☐ OR ☐ Correspondence address below

Name David L. Wisz

Address 400 W. Maple Road

Address Suite 350

City Birmingham

State Michigan

ZIP 48009

Country United States

Telephone (248) 988-8360

Fax (248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Robert J.
(first and middle [if any])

Family Name Ostrander
or Surname

Inventor's
Signature

Robert J. Ostrander

Date Nov. 26, 2003

Residence: City Orchard Lake

State MI

Country U.S.

Citizenship U.S.

Mailing Address 3349 Indiandale

Mailing Address

City Orchard Lake

State MI

ZIP 48324

Country U.S.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Krishna
(first and middle [if any])

Family Name Dhanesh Balakrishnan
or Surname

Inventor's
Signature

Date

Residence: City Trichur

State Kerala

Country India

Citizenship India

Mailing Address Cheriyl (Pournamy) House, IQ Road, Chalakudy Post.

Mailing Address

City Trichur

State Kerala

ZIP 680307

Country India

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type in full (in) inside this box →

PTO/SB01 (10-01)
 Approved for use through 10/31/2003. PNR 1001-0032
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Patent Reduction Act of 1980, no papers are required in connection with a collection of information, unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Doc Code Label 026086 OR ☐ Correspondence address below

Name David L. Wiaz

Address 400 W. Maple Road

Address Suite 350

City Birmingham

State Michigan

Zip 48009

Country United States

Telephone (248) 988-8360

Fax (248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are so marked as such and further that all statements were made with the knowledge that without true statements and the like as made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such will have statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned invention

Given Name Robert J.

Family Name or Surname Olexander

Inventor's signature

Date

Residence: City Orchard Lake

State MI

Country U.S.

Citizenship U.S.

Mailing Address 3349 Indianapolis

Mailing Address

City Orchard Lake

State MI

Zip 48321

Country U.S.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned invention

Given Name Krishna

Family Name or Surname Dharmachandran

Inventor's signature

Date

11/27/2003

Residence: City Trichur

State Kerala

Country India

Citizenship India

Mailing Address Cheriyil (Poumamy) House, IQ Road, Chalakudy Post.

Mailing Address

City Trichur

State Kerala

Zip 680307

Country India

☒ Additional inventors are being named on the 1 supplemental Additional Inventors' sheet(s) PTO/SB02A attached hereto.

[Page 2 of 2]

** TOTAL PAGE.03 **

Please type a plus sign (+) inside this box → +

PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christopher John		Steele	
Inventor's Signature <i>Christopher J. Steele</i>		Date <u>12-1-03</u>	
Residence: City Lake Orion	State MI	Country U.S.	Citizenship U.S.
Mailing Address 3358 Millcrest Drive			
Mailing Address			
City Lake Orion	State MI	ZIP 48360	Country U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Anthony G.		Lentini	
Inventor's Signature <i>Anthony G. Lentini</i>		Date <u>11/26/03</u>	
Residence: City St. Clair Shores	State MI	Country U.S.	Citizenship U.S.
Mailing Address 21516 O'Connor			
Mailing Address			
City St. Clair Shores	State MI	ZIP 48080	Country U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.